PTO/SB/C1 (08-03)
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DÉCLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

Declaration
Submitted
with Initial
Filing

OR

Declaration
Submitted after Initial
Filing (surcharge
37 CFR 1.16 (e))
required)

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Attorney Docket Number	38213.00009.CIP1		
First Named Inventor	Mitchell C. Voges et al.		
COMP	PLETE IF KNOWN		
Application Number	10/722,580		
Filing Date	November 26, 2003		
Art Unit	3711		
Examiner Name	TBD		

I hereby declare that:					
Each inventor's residence	, mailing address	, and citizenship are as	stated below next to the	heir name.	
I believe the inventor(s) na patent is sought on the inv		the original and first in	ventor(s) of the subjec	t matter which is cla	aimed and for which a
SYSTEMS AND METHODS FOR FITTING GOLF EQUIPMENT					
the specification of which		(Title of the In	vention)		
· .		•			
is attached hereto					
or					
was filed on (MM/DD/	YYYY) 11/26/2	2003 a	s United States Applica	ation Number or PC	T International
Application Number		and was amende	ed on (MM/DD/YYYY)		(if applicable).
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.					
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.					
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.					
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified C YES	opy Attached NO
		•			
Additional foreign applica	tion numbers are	listed on a supplement	tal priority data sheet F	TO/SB/02B attache	d hereto:

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This collection of information is required by 37 CFR 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing this form, call 1-800-PTO-9199 and select option 2.

DECLARATION – Utility or Design Patent Application

Direct all correspondence to: Custo	omer Number	36183 OR	Correspondence address below			
Name						
Address						
City		State	Zip			
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.						
NAME OF SOLE OR FIRST INVENTOR:		A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any]) MITCHELL CLARK		Family Name or Surname VOGES				
Inventor's Signature MtLLL C			Date 6/1/04			
Residence: City SIMI VALLEY	State (Country IJSA	Citizenship USA			
Mailing Address 237 RANDELY CO	OURT					
City SIMI VALLEY	State CALIFORNIA	ZIP 93065	Country USA			
NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any]) DANIEL PATRICK		Family Name or Surname H	·			
Inventor's Signature June 1, 2001						
SANTA CLARITA	State CALIFORNIA	Country USA	Ciftzenship USA			
Mailing Address 27451 SILVER OAK LANE # 2031						
City SANTA CLARITA	A CLARITA State CALIFORNIA		Country			
Additional inventors are being named on the supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.						

(Page 2 of 2)

POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO						
		14 00				
I hereby appoin	1	JUN 15 2004 36	2402			
Practitioners OR	associated with the Customer Number:		5183			
		TA TOP	•			
Practitioner(s	s) named below (if more than ten patent practit	ioners are to be name	ed, then a custon	ner number must be used):		
	Name	Reg	istration Num	nber		
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			<u> </u>			
			•			
						
as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned <u>only</u> to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b).						
Assignee Name	and Address:					
	MAX OUT GOLF LLC					
	14548 VENTURE BLVD.					
SHERMAN OAKS, CA 91403						
A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b)						
may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.						
SIGNATURE of Assignee of Record						
The individual whose signature and title is supplied below is authorized to act on behalf of the assignee						
Name	MITCHELL C. VO) GES				
Signature	Mathe C. Vous		Date	61,104		
Title	PASIDENT		Telephone	818-385-1414		